Rare Disease of Public Health Significance

1. DISEASE REPORTING

A. Purpose of Reporting and Surveillance

- 1. To understand the epidemiology of emerging and uncommon diseases in Washington State.
- 2. To raise the index of suspicion of a possible bioterrorism event.

B. Legal Reporting Requirements

- 1. Health care providers: immediately notifiable to local health jurisdiction.
- 2. Hospitals: immediately notifiable to local health jurisdiction.
- 3. Laboratories: no requirements for reporting.
- 4. Local health jurisdictions: **immediately notifiable to the Washington State** Department of Health (DOH) Communicable Disease Epidemiology Section (CDES).

C. Local Health Jurisdiction Investigation Responsibilities

- 1. Responsibilities are dependent on the disease under investigation.
- 2. Report all cases to CDES through the Public Health Issues Management System (PHIMS) as a Rare Disease of Public Health Significance.

2. THE DISEASES AND THEIR EPIDEMIOLOGY

Rare diseases of public health significance are defined as diseases or conditions of general public health concern, which are not commonly diagnosed in Washington residents. Examples include:

Acanthamoeba

Anthrax **Babesiosis**

Balamuthia mandrillaris

Burkholderia

Coccidioidomycosis Cryptococcus gattii Domoic acid poisoning

Ehrlichiosis Histoplasmosis

Influenza, avian or noval

Influenza, pediatric death

Lymphocytic choriomeningitis

Monkeypox Naegleria fowleri

Orf

Prion disease (e.g., Creutzfeldt-Jakob disease)

Rocky Mountain spotted fever

Severe acute respiratory syndrome-associated

coronovirus disease (SARS)

Staph aureus, vancomycin-intermediate (VISA) Staph aureus, vancomycin-resistant (VRSA)

Tick paralysis

Toxic-shock syndrome Vaccinia transmission

Varicella, death

Viral hemorrhagic fevers

Unexplained critical illnesses or unexplained deaths are reported separately as immediately notifiable conditions. Other rare conditions are notifiable separately, including arboviral encephalitis (e.g., dengue, St. Louis encephalitis, western equine encephalitis), brucellosis, cholera, and yellow fever.

Certain rare diseases have been reported recently in Washington residents. These cases are summarized annually in the Washington State Communicable Disease Report. For information on human prion disease, please see http://www.doh.wa.gov/notify/nc/prion.htm.

3. CASE DEFINITIONS

Cases definitions for some Rare Diseases of Public Health Significance can be found at: http://www.cdc.gov/ncphi/disss/nndss/casedef/case_definitions.htm.

4. DIAGNOSIS AND LABORATORY SERVICES

Appropriate test(s) for diagnosis depend on the suspected agent. Commercial laboratory tests may not be reliable for many of these rare diseases. Therefore, laboratory confirmation by CDC may be recommended. Consult with CDES for assistance with diagnosis and testing.

5. ROUTINE CASE INVESTIGATION

The case investigation depends on the suspected agent. Consult with CDES for assistance with performing a public health investigation.

6. CONTROLLING FURTHER SPREAD

Infection control measures depend on the suspected agent. Consult with CDES.

7. ROUTINE PREVENTION

Routine prevention measures depend on the suspected agent.

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UPDATES

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